	BOARD OF HEALTH State File No
1. PLACE OF BIRTH	TITAL STATISTICS PIPICATE OF BIRTH Registered No. 243
County Tila	State Anyona
District or Township	or Village
City St., Ward Ward	
2. Full name of child Margarita Somales If child is not yet named, make supplemental report, as directed.	
3. Sex of Child To be answered ONLY 4. Twin, triplet or other	er 6. Legitimate?
Female in event of plural 5. No., in order of birth	7. Date of birth Dec. 24, 1928 Month Day Year
8. FATHER	14. MOTHER
Pull name Jose Gonzales	Full maiden name gosephing Hidalgo
9. Residence (Usual place of abode)	15 Residence (Usual place of abode)
If non-resident, give place and state.	If non-resident, give place and state.
10. Color or race	16 Color or race
Mexican 11. Age at last birthday 32 (Years)	Mexican 17. Age at last birthday 32 (Years)
12. Birthplace (city or place) Juma	18. Birthplace (city or place) Las Vagus,
(State or country) Anyona	(State or country) Hew mexico
13. Occupation meat cutter	19. Occupation
Nature of industry	Nature of industry Housewije
20, Number of children of this mother 1 (a) Born alive as	nd now living Thull 21. Were precautions taken against oph-
(1) 2011 41110 21	out now dead Mone thalmia neonatorum?
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.	
I hereby certify that I attended the birth of this child, who was the Alive at f.m. on the date above stated (Born alive or stillborn.)	
*When there was no attending physician or midwife, then the father, householder, signature	
etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.	
Given name added from a supplemental report Address Llote Augusta	
Month, day, year	
Registrar Filed.	4 1929 B. E. Challen Registrar
1100 1001 101	
472-1024-186	

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